

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: July 22, 2005 2 Serial/Patent # 10/534,760

3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing				\$
Amendment				\$
Extension of Time				\$
Notice of Appeal/Appeal				\$
Petition				\$
Issue				\$
Cert of Correction/Terminal Disc.				\$
Maintenance				\$
Assignment				\$
Other				\$
		7 TOTAL AMOUNT OF REFUND	\$ <u>100.00</u>	
8 TO BE REFUNDED BY:				
10 REASON:		Treasury Check		
Overpayment		Credit Deposit A/C #:		
Duplicate Payment		, <u>19-0741</u>		
No Fee Due (Explanation):				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>BARBARA CAMPBELL</u>		TITLE: _____		
SIGNATURE: <u>B.C.</u>		PHONE: <u>703 308-9140</u>		
OFFICE: <u>PCT/DO/EO</u>		EXT 217		
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: _____		Repln. Ref: 07/22/2005 BCAMPBEL 0013223500 DAH:190741 Name/Number:10534760 FC: 9204 \$100.00 CR		
DATE: _____				

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B